

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Environment America Action Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00531814	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Winning Connections, Inc</b>			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 317 Pennsylvania Ave SE 2nd Floor			Amount 2774.25		
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4707		
Purpose of Expenditure PHONE VOTER CONTACT (ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016		
Name of Federal Candidate MCGINTY, KATHLEEN ALANA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought		80899.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Winning Connections, Inc</b>			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 317 Pennsylvania Ave SE 2nd Floor			Amount 2774.25		
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4708		
Purpose of Expenditure PHONE VOTER CONTACT (ESTIMATE)		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016		
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		256344.65	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5548.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Aurilio, Anna, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Signature